

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-879)

SERIAL NO.

FILING DATE

10/59/195

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3		/				
4		/				
5		/				
6	/	/				
7	/	/				
8	/	/				
9		/				
10		/				
11		/				
12		/				
13		/				
14		/				
15		/				
16		/				
17		/				
18	/	/				
19	/	/				
20	/	/				
21	/	/				
22		/				
23	/	/				
24	/	/				
25	/	/				
26	/	/				
27		/				
28		/				
29		/				
30		/				
31	/	/				
32	/	/				
33	/	/				
34	/	/				
35	/	/				
36	/	/				
37	/	/				
38	/	/				
39	/	/				
40	/	/				
41	/	/				
42	/	/				
43	/	/				
44	/	/				
45	/	/				
46	/	/				
47		/				
48		/				
49	/	/				
50	/	/				
TOTAL IND.	2	↓		↓		↓
TOTAL DEP.	19	←		←		←
TOTAL CLAIMS	21					

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	/					
52	/					
53	/					
54	/					
55	/					
56	/					
57	/					
58	/					
59	/					
60	/					
61	/					
62	/					
63	/					
64	/					
65	/					
66	/					
67	/					
68	/					
69	/					
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89	/					
90	/					
91	/					
92	/					
93	/					
94	/					
95	/					
96	/					
97	/					
98	/					
99	/					
100	/					
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875).

SERIAL NO.

10/59/195

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101						
102						
103						
104						
105						
106						
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144						
145						
146						
147						
148						
149						
150						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
151						
152						
153						
154						
155						
156						
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193						
194						
195						
196						
197						
198						
199						
200						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						